NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	PA AR 06264 R01

2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	n/a

		Company Name	Company NAIC Number
3.	A.	**Hanover American Insurance Company**	B. **0088-36064**

		Product Coding Matrix Line of Business (i.e., Type of Insurance)	Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
4.	A.	**Personal Auto – 19.0000**	B. **Private Passenger Auto – 19.0001**

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
Bodily Injury	19.0%	10.0%					
Property Damage	-0.9%	0.0%					
Combined Single Limit	N/A	6.0%					
Uninsured Motorist	23.1%	12.0%					
Medical Payments	13.9%	10.0%					
Comprehensive	-12.3%	-5.5%					
Collision	-10.5%	-5.5%					
TOTAL OVERALL EFFECT	3.2%	2.0%					

6.   5 Year History   Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2000	189	-0.5%	05/01/2000	174,754	254,220	145.5%	62.8%
2001	453	-0.4%	N/A	318,918	197,924	62.1%	63.8%
2002	1306	0.0%	03/01/2002	1,201,771	757,777	63.1%	67.3%
2003	1269	5.0%	03/01/2003	1,550,949	917,512	59.2%	62.1%
2004	1176	5.0%	05/01/2004	1,547,867	1,262,291	82.6%	62.1%
2005	1194	3.5%	05/01/2005	1,448,902	476,155	33.9%	59.8%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	15.7%
B. General Expense	10.3%
C. Taxes, License & Fees	3.1%
D. Underwriting Profit & Contingencies	4.3%
E. Other (explain)	0.0%

								F. TOTAL	33.7%

8.   **N**   Apply Lost Cost Factors to Future filings? (Y or N)

9.   **7.4%**   Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____

10.   **-5.5%**   Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____